

Name of Applicant: <u>LJPS, Inc.</u>		
Name of Business (DBA): <u>Olde Main Brewing Company</u>		
Address of Premises: <u>316 Main St.</u>		
City <u>Ames</u>	County: <u>Story</u>	Zip: <u>50010</u>
Business	<u>(515) 232-0553</u>	
Mailing	<u>316 Main St.</u>	
City <u>Ames</u>	State <u>IA</u>	Zip: <u>50010</u>

**Contact Person**

Name	Matt (Scott's # is 515-231-9626 sgriffen1962@gmail.com)		
Phone:	(515) 400-5981	Email	mattombc@gmail.com

**Classification** Class C Liquor License (LC) (Commercial)

**Term:**12 months

**Effective Date:** 08/24/2018

**Expiration Date:** 08/23/2019

**Privileges:**

Class C Liquor License (LC) (Commercial)

Outdoor Service

**Status of Business**

BusinessType:	<u>Privately Held Corporation</u>		
Corporate ID Number:	<u>XXXXXXXXXX</u>	Federal Employer ID	<u>XXXXXXXXXX</u>

**Ownership**

**Scott Griffen**

First Name:	<u>Scott</u>	Last Name:	<u>Griffen</u>	
City:	<u>Ames</u>	State:	<u>Iowa</u>	Zip: <u>50010</u>
Position:	<u>Owner</u>			
% of Ownership:	<u>50.00%</u>	U.S. Citizen:	<u>Yes</u>	

**Daniel Griffen**

First Name:	<u>Daniel</u>	Last Name:	<u>Griffen</u>	
City:	<u>Potomac</u>	State:	<u>Maryland</u>	Zip: <u>24854</u>
Position:	<u>Owner</u>			
% of Ownership:	<u>25.00%</u>	U.S. Citizen:	<u>Yes</u>	

**Susan Griffen**

First Name:	<u>Susan</u>	Last Name:	<u>Griffen</u>	
City:	<u>Potomac</u>	State:	<u>Maryland</u>	Zip: <u>24854</u>
Position:	<u>Owner</u>			

% of Ownership: 25.00%

U.S. Citizen: Yes

**Insurance Company Information**

**Insurance Company:** Illinois Casualty Co

**Policy Effective Date:** 08/24/2018

**Policy Expiration** 08/23/2019

**Bond Effective**

**Dram Cancel Date:** 09/25/2018

**Outdoor Service Effective** 04/24/2019

**Outdoor Service Expiration** 08/23/2019

**Temp Transfer Effective**

**Temp Transfer Expiration Date:**